SENATE BILL 226 (LRB -1179)

An Act to repeal 51.13 (1) (f) and 51.13 (2); to renumber and amend 51.13 (4) (g) 1., 51.13 (6) (a), 51.13 (7) (b) and 51.61 (6); to consolidate, renumber and amend 51.13 (3) (a) and (c); to amend 51.13 (1) (title), 51.13 (1) (a), 51.13 (1) (b), 51.13 (1) (c) 3., 51.13 (1) (d), 51.13 (1) (e), 51.13 (3) (b), 51.13 (4) (a) (intro.), 51.13 (4) (c), 51.13 (4) (d), 51.13 (4) (g) (intro.), 51.13 (4) (h) (intro.), 51.13 (6) (c), 51.13 (7) (title), 51.13 (7) (a), 51.13 (7) (c), 51.14 (title), 51.14 (1), 51.14 (3) (a), 51.14 (3) (b) 3., 51.14 (3) (f), 51.14 (3) (g), 51.14 (3) (h) (intro.), 51.14 (3) (h) 1., 51.14 (3) (j), 51.14 (4) (a), 51.14 (4) (g) (intro.), 51.22 (2), 51.30 (5) (b) 1., 51.30 (5) (b) 2., 51.35 (3) (a), 51.35 (3) (b), 51.35 (3) (g), 51.35 (4) (d), 51.45 (10) (am) and 51.45 (11) (a); and to create 51.01 (13r), 51.13 (4) (g) 1. a., 51.13 (4) (g) 1. b., 51.13 (4) (g) 1. c., 51.13 (4) (g) 4., 51.13 (7) (b) 3., 51.135, 51.14 (1m), 51.61 (6) (a) and 51.61 (6) (b) of the statutes; relating to: informed consent for minors for inpatient and outpatient treatment for mental illness and developmental disability, informed consent for the administration to minors of psychotropic medication, and access to records. (FE)

	10-27.	S.	Introduced by Senators Roessler, Leibham, Olsen, Stepp and Grothman; cosponsored by Representatives Gundrum, Strachota, Ainsworth, Hahn, Hines, Hundertmark, Kestell, Krawczyk, Musser, Ott, Owens, M. Williams and Lothian.	
	06-02.	S.	Read first time and referred to committee on Health, Children, Families, Aging and Long Term Care	237
	06-13.	S.	Fiscal estimate received.	
	06-14.	S.	Public hearing held.	
	09-19.	S.	LRB correction	358
	09-30.	S.	Senate amendment 1 offered by Senator Roessler (LRB a0986)	
	10-18.	S.	Senate amendment 1 to Senate amendment 1 offered by Senator Roessler (LRB a1175)	
	10-20.	S.	Executive action taken.	
	10-24.	S.	Report adoption of Senate Amendment 1 to Senate Amendment 1 recommended by committee on Health, Children, Families, Aging and Long Term Care, Ayes 5, Noes 0	402
	10-24.	S.	Report adoption of Senate Amendment 1 recommended by committee on Health, Children, Families, Aging and Long Term Care, Ayes 5, Noes 0	
	10-24.	S.	Report passage as amended recommended by committee on Health, Children, Families, Aging and Long Term Care, Ayes 3, Noes 2	
	10-24.	S.	Available for scheduling.	
	10-27.	S.	Placed on calendar 11-1-2005 by committee on Senate Organization.	
	10-31.	S.	Senator Grothman withdrawn as a coauthor	417
	11-01.	S.	Read a second time	
	11-01.	S.	Senate amendment 1 to Senate amendment 1 adopted	
	11-01.	S.	Senate amendment 1 adopted	
	11-01.	S.	Ordered to a third reading	
	11-01.	S.	Rules suspended	
	11-01.	S.	Read a third time and passed , Ayes 19, Noes 14	
	11-01.	S.	Ordered immediately messaged	
0	06			
	01-05.	Α.	Received from Senate	710
	01-05.	Α.	Read first time and referred to committee on Health	
	02-08.	A.	Public hearing held.	
	02-27.	Α.	Assembly amendment 1 offered by Representative Underheim (LRB a2488)	847
	02-28.	Α.	Executive action taken.	
	03-07.	A.	Report Assembly Amendment 1 adoption recommended by committee on Health, Ayes 12, Noes 0	909
	03-07.	A.	Report concurrence as amended recommended by committee on Health, Ayes 12, Noes 0	909
	03-07.	A.	Referred to committee on Rules	
	03-07.	Α.	Placed on calendar 3-9-2006 by committee on Rules.	
	03-07.	A.	Made a special order of business at 10:28 A.M. on 3-9-2006 pursuant to Assembly Resolution 51	933
	03-09.	A.	Read a second time	
	03-09.		Assembly amendment 1 adopted	
	03-09.	Α.	Ordered to a third reading	
	03-09.	Α.	Rules suspended	
	03-09.	Α.	Read a third time and concurred in as amended	
	03-09.	Α.	Ordered immediately messaged	945
	03-09.	S.	Received from Assembly amended and concurred in as amended, Assembly amendment 1 adopted	721
	03-09.	S.	Available for scheduling.	
	04-24.	S.	Placed on calendar 4-25-2006 by committee on Senate Organization.	
	04-25.	S.	Assembly amendment 1 concurred in.	
	04-25.	S.	Action ordered immediately messaged.	
	J . MJ.			

2005 ENROLLED BILL

 $05en \leq B-226$

ADOPTED Orig	DOCUMENTS	: SubAmdt	05 - 117911
Amendmen	nts to above (if	none, write "NONE"): <u>SA</u> †	a 0986/2
Correction	s – show date (if none, write "NONE"):	a 2488/1 ept 16, 2005
Topic	Pel		
		4-26-06 SNC Date	Mill Enrolling Drafter

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2005-2006 LEGISLATURE

CORRECTIONS IN:

2005 SENATE BILL 226

Prepared by the Legislative Reference Bureau (September 16, 2005)

1. Page 18, line 9: delete the material beginning with "under" and ending with "years" on line 10 and substitute "under 14 years".

(END)

LRB-1179/1ccc-1 CJS:ch



State of Misconsin 2005-2006 LEGISLATURE



CORRECTIONS IN:

2005 SENATE BILL 226

Prepared by the Legislative Reference Bureau (May 9, 2006)

In enrolling, the following correction was made:

Item 9 of senate amendment 1 and item 2 of senate amendment 1 to senate amendment 1 were not given effect because item 5 of assembly amendment 1 deleted that material.

(END)

June 2, 2005 – Introduced by Senators Roessler, Leibham, Olsen, Stepp and Grothman, cosponsored by Representatives Gundrum, Strachota, Ainsworth, Hahn, Hines, Hundertmark, Kestell, Krawczyk, Musser, Ott, Owens, M. Williams and Lothian. Referred to Committee on Health, Children, Families, Aging and Long Term Care.

AN ACT to repeal 51.13 (1) (f) and 51.13 (2); to renumber and amend 51.13 (4) 1 (g) 1., 51.13 (6) (a), 51.13 (7) (b) and 51.61 (6); to consolidate, renumber and 2 3 amend 51.13 (3) (a) and (c); to amend 51.13 (1) (title), 51.13 (1) (a), 51.13 (1) (b), 51.13 (1) (c) 3., 51.13 (1) (d), 51.13 (1) (e), 51.13 (3) (b), 51.13 (4) (a) (intro.), 4 5 51.13 (4) (c), 51.13 (4) (d), 51.13 (4) (g) (intro.), 51.13 (4) (h) (intro.), 51.13 (6) (c), 6 51.13 (7) (title), 51.13 (7) (a), 51.13 (7) (c), 51.14 (title), 51.14 (1), 51.14 (3) (a), 51.14 (3) (b) 3., 51.14 (3) (f), 51.14 (3) (g), 51.14 (3) (h) (intro.), 51.14 (3) (h) 1., 7 8 51.14 (3) (j), 51.14 (4) (a), 51.14 (4) (g) (intro.), 51.22 (2), 51.30 (5) (b) 1., 51.30 9 (5) (b) 2., 51.35 (3) (a), 51.35 (3) (b), 51.35 (3) (g), 51.35 (4) (d), 51.45 (10) (am) 10 and 51.45 (11) (a); and to create 51.01 (13r), 51.13 (4) (g) 1. a., 51.13 (4) (g) 1. 11 b., 51.13 (4) (g) 1. c., 51.13 (4) (g) 4., 51.13 (7) (b) 3., 51.135, 51.14 (1m), 51.61 12 (6) (a) and 51.61 (6) (b) of the statutes; relating to: informed consent for minors 13 for inpatient and outpatient treatment for mental illness and developmental

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disability, informed consent for the administration to minors of psychotropic medication, and access to records.

Analysis by the Legislative Reference Bureau

Currently, the mental health laws distinguish between minors under 14 years of age and minors 14 years of age or older with regard to giving informed consent for outpatient treatment for mental illness or developmental disability; voluntary admission to and discharge from an inpatient facility for treatment and rehabilitation of mental illness or developmental disability; reexamination under, or modification or cancellation of, an involuntary commitment order for treatment for mental illness or developmental disability; transfer from a juvenile secured correctional facility to an inpatient facility for treatment for mental illness or developmental disability; access and consent to the release of court records and treatment records; and informed consent for medication and treatment.

Execution of an application for inpatient treatment for mental illness and developmental disability

Currently, a minor 14 years of age or older may, together with his or her parent with legal custody or guardian, execute an application for inpatient treatment in a publicly funded treatment facility. For minors under 14 years of age, the parent or guardian may execute the application. The refusal of a minor 14 years of age or older to execute an application is reviewable by the court assigned to exercise jurisdiction under the Children's Code (juvenile court). If a minor wishes to be admitted to a publicly funded inpatient facility and his or her parent or guardian refuses to execute an application or is unable to be found, the minor may petition juvenile court for approval of the admission. A minor 14 years of age or older may apply and be admitted to an inpatient treatment facility for diagnosis and evaluation for dental, medical, or psychiatric services for a period not to exceed 12 days; for a minor under 14 years of age, the application must be executed by the minor's parent or guardian. If a minor attains 14 years of age while admitted to an inpatient treatment facility, the facility director must request the minor and his or her parent or guardian to execute an application for admission if the minor is in need of further inpatient care; if the application is not executed by the minor's 14th birthday, he or she must be discharged unless, under certain time limits, a statement is filed for emergency detention or a petition is filed for emergency commitment, involuntary commitment, or protective placement.

This bill continues to permit a minor aged 14 years or older, together with his or her parent or guardian, to execute an application for admission to an inpatient facility. However, if the minor refuses to execute the application, the parent or guardian may do so on the minor's behalf. An inpatient admission made despite refusal by the minor must be reviewed by juvenile court, and the minor is entitled to receive, among other things, an independent evaluation and assistance from the state protection and advocacy agency. For short–term admissions, a minor whose parent or guardian refuses to execute an admission application or cannot be found

or for whom there is no parent with legal custody may apply and be admitted. The bill requires that the application for a minor 14 years of age or older be executed by the minor and his or her parent or guardian, except that the parent or guardian may execute the application if the minor refuses, and such an admission is reviewable by juvenile court. For a minor who attains age 14 while admitted to an inpatient treatment facility and who refuses to execute an application for admission, the bill permits the minor's parent or guardian to execute the application on the minor's behalf.

Admissions for privately funded inpatient treatment for mental illness and developmental disability

Under current law, a minor may be admitted to a private inpatient treatment facility without complying with certain of the requirements that apply to admissions to publicly funded treatment facilities.

This bill eliminates the distinctions in requirements between admissions for minors to publicly funded and privately funded inpatient treatment facilities for mental illness and developmental disability, except that publicly funded admissions continue to be through county departments of community programs or developmental disabilities services or through the Department of Health and Family Services (DHFS).

Discharge upon request

Under current law, a minor 14 years of age or older who is voluntarily admitted to an inpatient facility for treatment for mental illness or developmental disability or any minor whose parent or guardian refuses to execute an admission application or cannot be found or for whom there is no parent with legal custody who has petitioned successfully for admission may request that he or she be discharged from the facility and, subject to certain exceptions, must be discharged within 48 hours after submission of the request. A minor under 14 years of age, however, may be discharged on his or her request only if his or her parent or guardian also requests discharge or after a hearing before the juvenile court to determine the continued appropriateness of the admission.

This bill eliminates the right of a minor aged 14 years or older to be discharged from inpatient treatment for mental illness or developmental disability within 48 hours after solely requesting the discharge, except for a minor whose parent or guardian refused to consent to admission or was unable to be found or for whom there is no parent with legal custody and who was admitted to an inpatient facility after a hearing. Under the bill, a minor 14 years of age or older may request discharge together with a parent or guardian. If a minor 14 years of age of older wishes to be discharged and the parent or guardian refuses to request discharge and if the director of the treatment facility avers in writing that the minor is in need of psychiatric services or services for developmental disability, that the facility's therapy or treatment is appropriate to the minor's needs, and that inpatient care in the treatment facility is the least restrictive therapy or treatment consistent with the minor's needs, the minor may not be discharged. A minor who wishes to be discharged but whose parent or guardian refuses may request a hearing before

juvenile court, if no hearing concerning the admission has been held within the immediately preceding 120 days.

Transfer for treatment and returns from treatment

Under current law, a minor aged 14 years or older who is in need of services for developmental disability or psychiatric services and the minor's parent or guardian must consent for transfer of the minor from a secured juvenile facility to an inpatient treatment facility. Only the minor need consent if the minor has successfully petitioned for admission and has a parent or guardian who refuses to consent or cannot be found or has no parent with legal custody. The minor and his or her parent or guardian have the same rights as are accorded for other admissions to inpatient treatment facilities. DHFS must file a petition for review of the transfer with the juvenile court. If the court is unable to determine that the consent was voluntary on the part of the minor, the court may order additional information or a hearing. If a notation of the minor's unwillingness appears on the face of the petition, or if a hearing has been requested by the minor or the minor's counsel, guardian ad litem, parent, or guardian, the court must hold a hearing to review the transfer. The parent or guardian of a minor under 14 years of age who is transferred to a treatment facility to receive services for developmental disability or psychiatric services may request transfer back to the secured correctional facility, secured child caring institution. or secured group home for the minor. For a minor 14 years of age or older, however, the minor may request return and be returned within 48 hours after submission of the request unless a statement is filed for emergency detention or a petition is filed for emergency commitment, involuntary commitment, or protective placement.

This bill continues to permit a minor aged 14 years or older, and the minor's parent or guardian, to consent for transfer of the minor from a secured juvenile facility to an inpatient treatment facility. However, if the minor refuses to consent, the parent or guardian may do so on the minor's behalf. A juvenile court must review a transfer made under the consent of the minor's parent or guardian despite the minor's refusal, and the minor is granted the rights to an independent evaluation and to assistance from the state protection and advocacy agency as under other discharges from an inpatient treatment facility. The bill eliminates the right of a minor 14 years of age or older to request return to a secured juvenile facility from an inpatient treatment facility and to be returned within 48 hours. Instead, the bill requires that the minor and his or her parent or guardian request the return and provides that the return be made within 48 hours unless a statement is filed for emergency detention or a petition is filed for emergency commitment, involuntary commitment, or protective placement.

Consent for outpatient treatment for mental illness

Currently, a minor aged 14 years or older may, together with his or her parent or guardian, consent to outpatient treatment for mental illness. "Outpatient mental health treatment" is defined as treatment and social services for mental illness, except psychotropic medications and 24-hour care and custody provided by a treatment facility. For minors under 14 years of age, the parent or guardian may consent. Either a minor 14 years of age or older or his or her parent or guardian may petition the mental health review officer in the county in which the parent or

guardian has residence for a review of a refusal of either the minor or the parent or guardian to provide the consent. In addition, review by juvenile court may be made directly or the juvenile court may review a decision by the mental health review officer.

This bill continues to permit a minor aged 14 years or older, together with his or her parent or guardian, to consent to outpatient treatment. However, if the minor refuses to execute the application, the parent or guardian may do so on the minor's behalf. A petition for review by the mental health officer must be filed by or on behalf of a minor whose parent or guardian has provided consent to outpatient treatment for the minor, despite the minor's refusal, and the minor has a right to review by juvenile court. The definition of "outpatient mental health treatment" is changed to eliminate the exclusion for the administration of psychotropic medications.

Psychotropic medication as treatment for mental illness

This bill requires a parent or guardian of a minor under 14 years of age to provide written, informed consent for the administration of psychotropic medication, as defined in the bill, to the minor as inpatient or outpatient treatment. For a minor 14 years of age or older, the minor and his or her parent or guardian must consent for the administration of psychotropic medication as inpatient or outpatient treatment, but if the minor refuses to consent, the parent or guardian may consent on the minor's behalf; administration of psychotropic medication to the minor despite his or her refusal is reviewable by juvenile court. A minor whose parent or guardian refuses to consent or cannot be found or who has no parent with legal custody may petition the juvenile court for approval of the administration of the psychotropic medication.

Records

Currently, the parent, guardian, or person in the place of a parent of a minor with developmental disability has access to the minor's court and treatment records at all times unless the minor, if aged 14 or older, files a written objection with the record custodian. Parents, guardians, and persons in the place of parents of other minors have full rights of access. Minors aged 14 or older have access to their own records; minors under age 14 have access to court and treatment records only in the presence of certain other persons.

The bill eliminates the right of a minor with developmental disability aged 14 or older to object to access to his or her court or treatment records by his or her parent, guardian, or person in the place of a parent.

For further information see the *state and local* fiscal estimate, which will be printed as an appendix to this bill.

The people of the state of Wisconsin, represented in senate and assembly, do enact as follows:

1 (AA'-251.01 (13r) "Psychotropic medication" has the meaning given in s. 50.035 (5).
2 (a) 2.

Section 2. 51.13 (1) (title) of the statutes is amended to read:

51.13 (1) (title) Admission through board or department.

SECTION 3. 51.13 (1) (a) of the statutes is amended to read:

51.13 (1) (a) Except as provided in par. (c) and s. ss. 51.45 (2m) and 51.47, the application for voluntary admission of a minor who is 14 years of age or older to an approved inpatient treatment facility for the primary purpose of treatment for alcoholism or drug abuse and the application for voluntary admission of a minor who is under 14 years of age to an approved inpatient treatment facility for the primary purpose of treatment for mental illness, developmental disability, alcoholism, or drug abuse shall be executed by a parent who has legal custody of the minor or the minor's guardian. Any statement or conduct by a minor who is the subject of an application for voluntary admission under this paragraph indicating that the minor does not agree to admission to the facility shall be noted on the face of the application and shall be noted in the petition required by sub. (4).

Section 4. 51.13 (1) (b) of the statutes is amended to read:

51.13 (1) (b) The application for voluntary admission of a minor who is 14 years of age or older to an approved inpatient treatment facility for the primary purpose of treatment for mental illness or developmental disability shall be executed by the minor and a parent who has legal custody of the minor or the minor's guardian, except as provided in par. (c) 1., except that, if the minor refuses to execute the application, a parent who has legal custody of the minor or the minor's guardian may execute the application on the minor's behalf.

Section 5. 51.13 (1) (c) 3. of the statutes is amended to read:

51.13 (1) (c) 3. The court may, at the minor's request, temporarily approve the admission <u>under subd. 1. or 2.</u> pending hearing on the petition. If a hearing is held under subd. 1. or 2., no review or hearing under sub. (4) is required.

SECTION 6. 51.13 (1) (d) of the statutes is amended to read:

51.13 (1) (d) A minor against whom a petition or statement has been filed under s. 51.15, 51.20, or 51.45 (12) or (13) may be admitted under this section. The court may permit the minor to become a voluntary patient under this section upon approval by the court of an application executed under par. (a), (b), or (c). The court shall then dismiss the proceedings under s. 51.15, 51.20, or 51.45 (12) or (13). If a hearing is held under this subsection, no hearing under sub. (4) is required.

Section 7. 51.13 (1) (e) of the statutes is amended to read:

51.13 (1) (e) A minor may be admitted immediately upon the approval of the application executed under par. (a) or (b) by the treatment director of the facility or his or her designee or, in the case of a center for the developmentally disabled, the director of the center or his or her designee, and, if the county department is to be responsible for the cost of the minor's therapy and treatment, the director of the appropriate county department under s. 51.42 or 51.437 if the county department is to be responsible for the cost of the minor's therapy and treatment. Admission under par. (c) or (d) shall also be approved, within 14 days of the minor's admission, by the treatment director of the facility or his or her designee, or in the case of a center for the developmentally disabled, the director of the center or his or her designee and, if the county department is to be responsible for the cost of the minor's therapy and treatment, the director of the appropriate county department under s. 51.42 or 51.437.

(em) Approval <u>under par.</u> (e) shall be based upon an informed professional opinion that the minor is in need of psychiatric services or services for developmental disability, alcoholism, or drug abuse, that the treatment facility offers inpatient therapy or treatment that is appropriate for the minor's needs, and that inpatient care in the facility is the least restrictive therapy or treatment consistent with the minor's needs. In the case of a minor who is being admitted for the primary purpose of treatment for alcoholism or drug abuse, approval shall also be based on the results of an alcohol or other drug abuse assessment that conforms to the criteria specified in s. 938.547 (4).

SECTION 8. 51.13 (1) (f) of the statutes is repealed.

SECTION 9. 51.13 (2) of the statutes is repealed.

SECTION 10. 51.13 (3) (a) and (c) of the statutes are consolidated, renumbered 51.13 (3) (am) and amended to read:

51.13 (3) (am) Prior to admission if possible, or as soon thereafter as possible,

the minor who is admitted under sub. (1) (a) or (b) and the minor's parent or guardian shall be informed by the director of the facility or his or her designee, both orally and in writing, in easily understandable language, of the review procedure in sub. (4), including the standards to be applied by the court and the possible dispositions; the minor's right to an independent evaluation, if ordered by the court; the minor's right to assistance from the state protection and advocacy agency designated under s. 51.62 (2) (a); the right under sub. (4) (d) to a hearing upon request under sub. (4), and; the minor's right to appointed counsel as provided in sub. (4) (d) if a hearing is held(c) A minor 14 years of age or older who has been admitted to an inpatient facility for the primary purpose of treatment for alcoholism or drug abuse, a minor under 14 years of age who has been admitted to an inpatient treatment facility for the primary

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purpose of treatment for mental illness, developmental disability, alcoholism, or drug abuse, and the minor's parent or guardian shall also be informed by the director or his or her designee, both orally and in writing, in easily understandable language, of; for a minor other than a minor specified under par. (b), the right of the minor or parent or guardian to request the minor's discharge as provided in or limited by sub. (7) (b); and of the minor's right to a hearing to determine continued appropriateness of the admission as provided in sub. (7) (c).

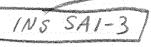
SECTION 11. 51.13 (3) (b) of the statutes is amended to read:

51.13 (3) (b) A minor 14 years of age or older who has been admitted to an inpatient treatment facility for the primary purpose of treatment for mental illness or developmental disability Prior to or at admission, a minor who is voluntarily admitted under sub. (1) (c) 1. or 2., and the minor's parent or guardian, if available, shall also be informed by the director or his or her designee, both orally and in writing, in easily understandable language, of the minor's right to request discharge and to be discharged within 48 hours of the request, as provided under sub. (7) (b), if no petition or statement is filed for emergency detention, or if no petition is filed for emergency commitment, involuntary commitment, or protective placement, and the minor's right to consent to or refuse treatment as provided in s. 51.61 (6).

Section 12. 51.13 (4) (a) (intro.) of the statutes is amended to read:

51.13 (4) (a) (intro.) Within 3 days after the admission of a minor under sub. (1), or within 3 days after an application is executed for admission of the minor, whichever occurs first, the treatment director of the facility to which the minor is admitted or, in the case of a center for the developmentally disabled, the director of the center, shall file a verified petition for review of the admission in the court assigned to exercise jurisdiction under chs. 48 and 938 in the county in which the

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facility is located. A copy of the application for admission and of any relevant professional evaluations shall be attached to the petition. The petition shall contain all of the following:

Section 13. 51.13 (4) (c) of the statutes is amended to read:

51.13 (4) (c) A copy of the petition shall be provided by the petitioner to the minor and, if available, his or her parents or guardian within 5 days after admission.

SECTION 14. 51.13 (4) (d) of the statutes is amended to read:

51.13 (4) (d) Within 5 days after the filing of the petition, the court assigned to exercise jurisdiction under chs. 48 and 938 shall determine, based on the allegations of the petition and accompanying documents, whether there is a prima facie showing that the minor is in need of psychiatric services, or services for developmental disability, alcoholism, or drug abuse, that whether the treatment facility offers inpatient therapy or treatment that is appropriate to the minor's needs; and that whether inpatient care in the treatment facility is the least restrictive therapy or treatment consistent with the needs of the minor; and, if the minor is 14 years of age or older and has been admitted to the treatment facility for the primary purpose of treatment for mental illness or developmental disability, whether the admission is voluntary on the part of the minor was made under an application executed by the minor and the minor's parent or guardian. If such a showing is made, the court shall permit voluntary admission. If the court is unable to make those determinations based on the petition and accompanying documents, the court may dismiss the petition as provided in par. (h); order additional information, including an independent evaluation, to be produced as necessary for the court to make those determinations within 44 days after admission or application for admission, whichever is sooner; or hold a hearing within M days after admission

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or application for admission, whichever is sooner. If a notation of the minor's unwillingness appears on the face of the petition, if the admission was made under an application executed by the minor's parent or guardian despite the minor's refusal, if the minor's parent or guardian has consented to the administration of psychotropic medication to the minor despite the minor's refusal, or if a hearing has been requested by the minor or by the minor's counsel, parent, or guardian, the court shall order an independent evaluation of the minor and hold a hearing to review the admission, within ways after admission or application for admission, whichever is sooner, or to review the administration of psychotropic medication, and shall appoint counsel to represent the minor if the minor is unrepresented. If the court considers it necessary, the court shall also appoint a guardian ad litem to represent the minor. The minor may receive assistance from the state protection and advocacy agency designated under s. 51.62 (2) (a).

SECTION 15. 51.13 (4) (g) (intro.) of the statutes is amended to read:

51.13 (4) (g) (intro.) If the court finds, under a hearing under par. (d), that the minor is in need of psychiatric services or services for developmental disability, alcoholism, or drug abuse in an inpatient facility, that the inpatient facility to which the minor is admitted offers therapy or treatment that is appropriate for the minor's needs and that is the least restrictive therapy or treatment consistent with the minor's needs, and, in the case of a minor 14 years of age or older who is being admitted for the primary purpose of treatment for mental illness or developmental disability, that the application is voluntary on the part of the minor, the court shall permit voluntary admission. If the court finds that the therapy or treatment in the inpatient facility to which the minor is admitted is not appropriate or is not the least restrictive therapy or treatment consistent with the minor's needs, the court may

(g), it shall do one of the following:

DAK:kjf:pg SECTION 15

order placement in or transfer to another more appropriate or less restrictive
inpatient facility, except that the court may not permit or order placement in or
transfer to the northern or southern centers for the developmentally disabled of a
minor unless the department gives approval for the placement or transfer, and if the
order of the court is shall first be approved by all of the following if applicable:
SECTION 16. 51.13 (4) (g) 1. of the statutes is renumbered 51.13 (4) (g) 1. (intro.)
and amended to read:
51.13 (4) (g) 1. The minor if he or she is 14 years of age or older and is being
admitted for For the primary purpose of treatment for mental illness or
developmental disability, any of the following, as applicable:
SECTION 17. 51.13 (4) (g) 1. a. of the statutes is created to read:
51.13 (4) (g) 1. a. For a minor who is under 14 years of age, a parent who has
legal custody of the minor or the minor's guardian.
SECTION 18. 51.13 (4) (g) 1. b. of the statutes is created to read:
51.13 (4) (g) 1. b. For a minor who is 14 years of age or older, the minor and a
parent who has legal custody of the minor or the minor's guardian, except that, if the
minor refuses approval, a parent who has legal custody of the minor or the minor's
guardian may provide approval on the minor's behalf.
SECTION 19. 51.13 (4) (g) 1. c. of the statutes is created to read:
51.13 (4) (g) 1. c. For a minor admitted under sub. (1) (c) 1. or 2., the minor.
SECTION 20. 51.13 (4) (g) 4. of the statutes is created to read:
51.13 (4) (g) 4. The department.
SECTION 21. 51.13 (4) (h) (intro.) of the statutes is amended to read:
51.13 (4) (h) (intro.) If the court does not permit-voluntary admission under par.

1	Section 22. 51.13 (6) (a) of the statutes is renumbered 51.13 (6) (a) 1. and
2	amended to read:
3	51.13 (6) (a) 1. A Subject to subd. 2. or 3., as applicable, a minor may be
4	admitted to an inpatient treatment facility without review under sub. (4) of the
5	application under sub. (4), for diagnosis and evaluation or for dental, medical, or
6	psychiatric services, for a period not to exceed 12 days. The application for
7	short-term admission of a minor shall be executed by the minor's parent with legal
8	custody of the minor or the minor's guardian, and if unless sub. (1) (c) applies.
9	2. If the minor is 14 years of age or older and is being admitted for the primary
10	purpose of diagnosis, evaluation, or services for mental illness or developmental
11	disability, the application shall be executed by the minor's parent or guardian and
12	the minor, except that, if the minor refuses to execute the application, the parent or
13	the guardian may execute the application. Admission under this subdivision of a
14	minor who refuses to execute the application is reviewable under sub. (4) (d).
15	3. A minor may not be readmitted to an inpatient treatment facility for
16	psychiatric services under this paragraph within 120 days of a previous admission
17	under this paragraph.
18	SECTION 23. 51.13 (6) (c) of the statutes is amended to read:
19	51.13 (6) (c) At the end of the 12-day period, the minor shall be released unless
20	an application has been filed for voluntary admission under sub. (1) or a petition or;
21	a statement has been filed for emergency detention; or a petition has been filed for
22	emergency commitment, involuntary commitment, or protective placement.
23	SECTION 24. 51.13 (7) (title) of the statutes is amended to read:
24	51.13 (7) (title) Discharge or continued appropriateness of admission.
25	SECTION 25. 51.13 (7) (a) of the statutes is amended to read:

51.13 (7) (a) If a minor is admitted to an inpatient treatment facility while under 14 years of age, and if upon reaching age 14 is in need of further inpatient care and treatment primarily for mental illness or developmental disability, the director of the facility shall request the minor and the minor's parent or guardian to execute an application for voluntary admission. If the minor refuses, the minor's parent or guardian may execute the application on the minor's behalf. Such an application may be executed within 30 days prior to a minor's 14th birthday. If the application is executed, a petition for review shall be filed in the manner prescribed in sub. (4), unless such a review has been held within the last 120 days. If the application is not executed by the time of the minor's 14th birthday, the minor shall be discharged unless a petition or statement is filed for emergency detention, emergency commitment, involuntary commitment, or protective placement by the end of the

SECTION 26. 51.13 (7) (b) of the statutes is renumbered 51.13 (7) (b) 1. and amended to read:

next day in which the court transacts business.

51.13 (7) (b) 1. Any minor 14 years of age or older who is voluntarily admitted under this section for the primary purpose of treatment for mental illness or developmental disability, and any minor who is voluntarily admitted under sub. (1) (c) 1. or 2., may request discharge in writing. In the case of

2. For a minor 14 years of age or older who is voluntarily admitted under this section sub. (1) (a) or (b) for the primary purpose of treatment for alcoholism or drug abuse or a minor under 14 years of age who is voluntarily admitted under this section sub. (1) (a) or (b) for the primary purpose of treatment for mental illness, developmental disability, alcoholism, or drug abuse, the parent or guardian of the minor may make the request-discharge in writing.

4. Upon receipt of any form of written request for discharge from a minor specified under subd. 1. or 3., the director of the facility in which the minor is admitted shall immediately notify the minor's parent or guardian. The, if available.

5. A minor specified in subd. 1., a minor specified in subd. 2. whose parent or guardian requests discharge in writing, and a minor specified in subd. 3. who requests and whose parent or guardian requests discharge in writing shall be discharged within 48 hours after submission of the request, exclusive of Saturdays, Sundays, and legal holidays, unless a petition or statement is filed for emergency detention, emergency commitment, involuntary commitment, or protective placement.

Section 27. 51.13 (7) (b) 3. of the statutes is created to read:

51.13 (7) (b) 3. For a minor 14 years of age or older who is admitted under sub. (1) (a) or (b) for the primary purpose of treatment for mental illness or developmental disability, the minor and the minor's parent or guardian may request discharge in writing. If the parent or guardian of the minor refuses to request discharge and if the director of the facility to which the minor is admitted or his or her designee avers, in writing, that the minor is in need of psychiatric services or services for developmental disability, that the facility's therapy or treatment is appropriate to the minor's needs, and that inpatient care in the treatment facility is the least restrictive therapy or treatment consistent with the needs of the minor, the minor may not be discharged under this paragraph.

SECTION 28. 51.13 (7) (c) of the statutes is amended to read:

51.13 (7) (c) Any minor 14 years of age or older who is voluntarily admitted under this section for the primary purpose of treatment for alcoholism or drug abuse, and who is not discharged under par. (b), and any minor under 14 years of age who

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is voluntarily admitted under this section for the primary purpose of treatment for mental illness, developmental disability, alcoholism, or drug abuse, and, other than a minor to which par. (b) 1. applies, who is not discharged under par. (b), may submit a written request to the court for a hearing to determine the continued appropriateness of the admission. If the director or staff of the inpatient treatment facility to which a minor described in this paragraph is admitted observes conduct by the minor that demonstrates an unwillingness to remain at the facility, including but not limited to a written expression of opinion or unauthorized absence, the director shall file a written request with the court to determine the continued appropriateness of the admission. A request that is made personally by a minor under this paragraph shall be signed by the minor but need not be written or composed by the minor. A request for a hearing under this paragraph that is received by staff or the director of the facility in which the child minor is admitted shall be filed with the court by the director. The court shall order a hearing as provided in sub. (4) (d) upon request if no hearing concerning the minor's admission has been held within 120 days after before court receipt of the request. The court shall appoint counsel and, if the court considers it necessary, a guardian ad litem to represent the minor and if If a hearing is held, the court shall hold the hearing within 14 days after receipt of the request, unless the parties agree to a longer period. After the hearing, the court shall make disposition dispose of the matter in the manner provided in sub. (4) (h).

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Section 29. 51.135 of the statutes is created to read:

51.135 Administration of psychotropic medication to minors. (1) (a) A parent with legal custody or the guardian of a minor under 14 years of age shall provide written, informed consent for the administration of psychotropic medication to the minor as inpatient or outpatient treatment for mental illness.

(b) A parent with legal custody or the guardian of a minor 14 years of age or
older and the minor shall provide written, informed consent for the administration
of psychotropic medication to the minor as inpatient or outpatient treatment for
mental illness, except that, if the minor refuses to consent to administration of the
psychotropic medication, the parent or guardian may provide consent on the minor's
behalf. Administration of psychotropic medication as inpatient treatment to a minor
under this paragraph who refuses to consent is reviewable under a hearing under s.
51.13 (4) (d). Section 51.14 (3) (a) applies to a minor under this paragraph who
refuses to consent to the administration of psychotropic medication as outpatient
treatment.

(2) If a minor wishes to provide written, informed consent for the administration of psychotropic medication as inpatient or outpatient treatment of the minor for mental illness, but the minor's parent with legal custody or guardian refuses to consent to administration of the psychotropic medication or cannot be found, or if there is no person with legal custody, the minor or a person acting on the minor's behalf may petition the court assigned to exercise jurisdiction under chs. 48 and 938 in the county of residence of the minor's parent or guardian for approval of the administration. A copy of the petition and a notice of hearing shall be served upon the parent or guardian at his or her last–known address. If, after a hearing, the court determines that the consent of the parent or guardian is being unreasonably withheld, that the parent or guardian cannot be found, or that there is no person with legal custody, and that the administration is appropriate to the minor's needs, the court shall approve the administration of the psychotropic medication without the consent of the parent or guardian.

SECTION 30. 51.14 (title) of the statutes is amended to read:

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SECTION 30

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51.14 (title) Outpatient mental health treatment of mi

Section 31. 51.14 (1) of the statutes is amended to read:

51.14 (1) Definitions. In this section, "outpatient mental health treatment" means treatment and social services for mental illness, except psychotropic medications and 24-hour care, treatment, and custody, that is provided by a treatment facility.

SECTION 32. 51.14 (1m) of the statutes is created to read:

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51.14 (1m) Consent to treatment. A parent who has legal custody of a minor

under

A years of age or the minor's guardian may provide informed consent to outpatient treatment for mental illness for the minor. A minor 14 years of age or older and a parent who has legal custody of the minor or the minor's guardian may provide informed consent to outpatient treatment for mental illness for the minor except that, if the minor refuses to consent, the parent or guardian may provide informed consent to the outpatient treatment on the minor's behalf.

Section 33. 51.14 (3) (a) of the statutes is amended to read:

51.14 (3) (a) Either a A minor 14 years of age or older or his or her parent or guardian may petition the mental health review officer in the county in which the minor's parent or guardian has residence for a review of a refusal or inability of either the minor or his or her the minor's parent or guardian to provide the informed consent for outpatient mental health treatment required under \$.51.61 (6) sub (140)

22 23 A petition for review by the mental health officer shall be filed by or on behalf of a

minor on whose behalf consent was provided under sub (1m) by the minor's parent

or guardian despite the minor's refusal.

SECTION 34. 51.14 (3) (b) 3. of the statutes is amended to read:

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51.14 (3) (b) 3. The facts substantiating the petitioner's belief that	t the	minor
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needs, or does not need, outpatient mental health treatment.		

SECTION 35. 51.14 (3) (f) of the statutes is amended to read:

51.14 (3) (f) If prior to a hearing under par. (g) either the minor or his or her parent or guardian requests and the mental health review officer determines that the best interests of the minor would be served, a petition may be filed for court review under sub. (4) without further review under this subsection.

SECTION 36. 51.14 (3) (g) of the statutes is amended to read:

51.14 (3) (g) Within 21 days after the filing of a petition under this subsection, the mental health review officer shall hold a hearing on the refusal <u>or inability</u> of the <u>minor or the minor's parent or guardian to provide informed consent for outpatient treatment or on the provision of informed consent by the parent or guardian despite <u>the minor's refusal</u>. The mental health review officer shall provide notice of the date, time and place of the hearing to the minor and, <u>if available</u>, the minor's parent or guardian at least 96 hours prior to the hearing.</u>

SECTION 37. 51.14 (3) (h) (intro.) of the statutes is amended to read:

51.14 (3) (h) (intro.) If following the hearing under par. (g) and after taking into consideration the recommendations, if any, of the county department under s. 51.42 or 51.437 made under par. (e), the mental health review officer finds all of the following, he or she shall issue a written order that, notwithstanding the written, informed consent requirement of s. 51.61 (b) sub the the written, informed consent of the minor, if the minor is refusing to provide consent, or the written, informed consent of the minor's parent or guardian, if the parent or guardian is refusing or unable to provide consent, is not required for outpatient mental health treatment for

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refusal, the	outpatient n	<u>nental health</u>	<u>treatment fo</u>	or the minor	is appropr	<u>iate</u> :

SECTION 38. 51.14 (3) (h) 1. of the statutes is amended to read:

51.14 (3) (h) 1. The informed consent of the parent or guardian is unreasonably withheld or the refusal of the minor to provide informed consent is unreasonable.

SECTION 39. 51.14 (3) (j) of the statutes is amended to read:

51.14 (3) (j) The mental health review officer shall notify the minor and the minor's parent or guardian, if available, of the right to judicial review under sub. (4).

SECTION 40. 51.14 (4) (a) of the statutes is amended to read:

51.14 (4) (a) Within 21 days after the issuance of the order by the mental health review officer under sub. (3) or if the requirements of sub. (3) (f) are satisfied applies, the minor of his or her parent or guardian may petition a court assigned to exercise jurisdiction under chs. 48 and 938 in the county of residence of the minor's parent or guardian for a review of the refusal of either the minor or his or her or inability of the minor's parent or guardian to provide the informed consent for outpatient mental health treatment required under \$5161(6) sub. (172) or for a review of the provision of informed consent by the parent or guardian despite the minor's refusal.

Section 41. 51.14 (4) (g) (intro.) of the statutes is amended to read:

51.14 (4) (g) (intro.) After the hearing under this subsection, the court shall issue a written order stating that, notwithstanding the written, informed consent requirement of s. 51.61 (6) sub. (1m), the written, informed consent of the minor, if the minor refuses to provide consent, or the written, informed consent of the parent or guardian, if the parent or guardian refuses or is unable to provide consent, is not required for outpatient mental health treatment for the minor or that, if the parent or guardian provided informed consent despite the minor's refusal, the outpatient

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mental health treatment for the minor is appropriate, if the court finds all of the following:

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Section 42. 51.22 (2) of the statutes is amended to read:

51.22 (2) Except as provided in s. 51.13 (2), voluntary for admissions that do not involve the department or a county department under s. 51.42 or 51.437 or a contract between a treatment facility and the department or a county department, admissions under ss. 51.10, 51.13, and 51.45 (10) shall be through the county department under s. 51.42 or 51.437 serving the person's county of residence, or through the department if the person to be admitted is a nonresident of this state. Admissions through a county department under s. 51.42 or 51.437 shall be made in accordance with s. 51.42 (3) (as) 1. or 51.437 (4rm) (a). Admissions through the department shall be made in accordance with sub. (3).

SECTION 43. 51.30 (5) (b) 1. of the statutes is amended to read:

51.30 (5) (b) 1. The guardian of an individual who is adjudged incompetent under ch. 880 shall have access to the individual's court and treatment records at all times. The parent, guardian, or person in the place of a parent of a developmentally disabled minor shall have access to the minor's court and treatment records at all times except in the case of a minor aged 14 or older who files a written objection to such access with the custodian of the records. The parent, guardian or person in the place of a parent of other minors shall have the same rights of access as provided to subject individuals under this section.

SECTION 44. 51.30 (5) (b) 2. of the statutes is amended to read:

51.30 (5) (b) 2. A minor upon reaching the age of who is aged 14 or older and admitted under s. 51.13 (1) (b) or (c) 1, or (7) (a) shall have access to his or her own court and treatment records, as provided in this section. A minor under the age of

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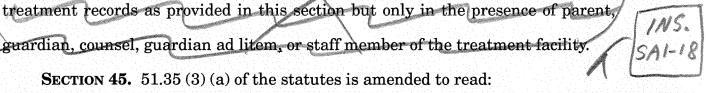
guardian, counsel, guardian ad litem, or staff member of the treatment facility.

Section 45. 51.35 (3) (a) of the statutes is amended to read:

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14 All other minors shall have access to court records but only in the presence of

parent, guardian, counsel, guardian ad litem, or judge and shall have access to



51.35 (3) (a) A licensed psychologist of a secured correctional facility, a secured child caring institution, or a secured group home, or a licensed physician of the department of corrections, who has reason to believe that any individual confined in the secured correctional facility, secured child caring institution, or secured group home is, in his or her opinion, in need of services for developmental disability, alcoholism, or drug dependency or in need of psychiatric services, and who has obtained voluntary consent to make a transfer for treatment, shall make a report, in writing, to the superintendent of the secured correctional facility, secured child caring institution, or secured group home, stating the nature and basis of the belief and verifying the consent. In the case of a minor age 14 or older who is in need of services for developmental disability or who is in need of psychiatric services, the minor and the minor's parent or guardian shall consent unless the minor is admitted under s. 51.13 (1) (c) 1. or unless the minor refuses to consent, in which case the minor's parent or guardian may consent on behalf of the minor. In the case of a minor age 14 or older who is in need of services for alcoholism or drug dependency or a minor under the age of 14 who is in need of services for developmental disability, alcoholism, or drug dependency or in need of psychiatric services, only the minor's parent or guardian need needs to consent unless the minor is admitted under s. 51.13 (1) (c). The superintendent shall inform, orally and in writing, the minor and the minor's parent or guardian, that transfer is being considered and shall inform them of the

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basis for the request and their rights as provided in s. 51.13 (3) (am). If the department of corrections, upon review of a request for transfer, determines that transfer is appropriate, that department shall immediately notify the department of health and family services and, if the department of health and family services consents, the department of corrections may immediately transfer the individual. The department of health and family services shall file a petition under s. 51.13 (4) (a) in the court assigned to exercise jurisdiction under chs. 48 and 938 of the county where the treatment facility is located.

SECTION 46. 51.35 (3) (b) of the statutes is amended to read:

51.35 (3) (b) The court assigned to exercise jurisdiction under chs. 48 and 938 shall determine, based on the allegations of the petition and accompanying documents, whether the transfer under par. (a) of the minor to an inpatient facility is appropriate and consistent with the needs of the minor and, if the minor is 14 years of age or older and is being transferred for the purpose of receiving services for developmental disability or psychiatric services, whether consent for the transfer is voluntary on the part of the minor was provided by the minor and his or her parent or guardian or whether the minor was admitted under s. 51.13 (1) (c) 1. If the court is unable to make those determinations based on the petition and accompanying documents, the court may order additional information, including an independent evaluation, to be produced as necessary to make those determinations within 14 days after admission, or the court may hold a hearing within 14 days after admission. If a notation of the minor's unwillingness appears on the face of the petition, if the transfer was made under a consent of the minor's parent or guardian despite the minor's refusal, or if a hearing has been requested by the minor or by the minor's counsel, guardian ad litem, parent, or guardian, the court shall order an independent

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evaluation of the minor, hold a hearing, and appoint counsel or a guardian ad litem for the minor as provided in s. 51.13 (4) (d). The minor may receive assistance from the state protection and advocacy agency designated under s. 51.62 (2) (a). At the conclusion of the hearing, the court shall approve or disapprove the request for transfer. If the minor is under the continuing jurisdiction of the court of another county, the court may order the case transferred together with all appropriate records to that court.

SECTION 47. 51.35 (3) (g) of the statutes is amended to read:

51.35 (3) (g) A minor 14 years of age or older who is transferred to a treatment facility under par. (a) for the purpose of receiving services for developmental disability or psychiatric services and the minor's parent or guardian may request in writing a return to the secured correctional facility, secured child caring institution, or secured group home, except that, if the minor refuses to make the request, the parent or guardian may make the request on behalf of the minor. In the case of a minor 14 years of age or older who is transferred to a treatment facility under par. (a) for the purpose of receiving services for alcoholism or drug dependency or a minor under 14 years of age, who is transferred to a treatment facility under par. (a) for the purpose of receiving services for developmental disability, alcoholism, or drug dependency, or psychiatric services, the parent or guardian may make the request. Upon receipt of a request for return from a minor 14 years of age or older, the director shall immediately notify the minor's parent or guardian. The minor, if available. A minor 14 years of age or older who requests and whose parent or guardian requests and a minor who was admitted under s. 51.13 (1) (c) who requests discharge in writing shall be returned to the secured correctional facility, secured child caring institution, or secured group home within 48 hours after submission of the request SAI-19

1	unless a petition or statement is filed for emergency detention, or a petition is filed
2	for emergency commitment, involuntary commitment, or protective placement.
3	SECTION 48. 51.35 (4) (d) of the statutes is amended to read:
4	51.35 (4) (d) The director of an inpatient facility may, under the requirements
5	of s. 51.10 (5) (c) or 51.13 (7), grant a discharge or may terminate services to any
6	patient voluntarily admitted under s. 51.10 or 51.13 when such patient requests a
7	discharge. Such discharge shall conform to the requirements of s. 51.10 (5) (c) or
8	51.13 (7).
9	SECTION 49. 51.45 (10) (am) of the statutes is amended to read:
10	51.45 (10) (am) A Except as provided in s. 51.47, a minor may apply for
11	voluntary treatment directly to an approved public treatment facility, but only for
12	those forms of treatment specified in sub. (7) (b) 5. and 7. Section 51.13 shall govern
13	voluntary governs admission of a minor alcoholic to an inpatient treatment facility.
14	SECTION 50. 51.45 (11) (a) of the statutes is amended to read:
15	51.45 (11) (a) An intoxicated person may come voluntarily to an approved
16	public treatment facility for emergency treatment. Any law enforcement officer, or
17	designated person upon the request of a law enforcement officer, may assist a person
18	who appears to be intoxicated in a public place and to be in need of help to his or her
19	home, an approved treatment facility or other health facility, if such person consents
20	to the proffered help. Section 51.13 shall govern voluntary governs admission of an
21	intoxicated minor to an inpatient facility under this paragraph.
22	SECTION 51. 51.61 (6) of the statutes is renumbered 51.61 (6) (intro.) and
23	amended to read:
24	51.61 (6) (intro.) Subject to the rights of patients provided under this chapter.
25	the department, county departments under s. 51.42 or 51.437, and any agency

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providing services under an agreement with the department or those county departments have the right to use customary and usual treatment techniques and procedures in a reasonable and appropriate manner in the treatment of patients who are receiving services under the mental health system, for the purpose of ameliorating the conditions for which the patients were admitted to the system. The written, informed consent of any patient shall first be obtained unless the person has been found not competent to refuse medication and treatment under s. 51.61 (1) (g) or the person is a minor 14 years of age or older who is receiving services for alcoholism or drug abuse or a minor under 14 years of age who is receiving services for mental illness, developmental disability, alcoholism, or drug abuse. In the case of a minor, the written, informed consent of the parent or guardian is required, except as provided under an order issued under s. 51/13(1)(c) or 51.14(3)(h) or (4)(g). If the minor is 14 years of age or older and is receiving services for mental illness or developmental disability, the written, informed consent of the minor and the minor's parent or guardian is required. A refusal of either a minor 14 years of age or older or the minor's parent or guardian to provide written, informed consent for admission to an approved inpatient treatment facility is reviewable under s. 51.13 (1) (c) 1. and a refusal of either a minor 14 years of age or older or the minor's parent or guardian to provide written, informed consent for outpatient mental health treatment is

SECTION 52. 51.61 (6) (a) of the statutes is created to read:

reviewable under s. 51.14. all of the following apply:

51.61 (6) (a) If the minor is under 14 years of age, for the receipt of inpatient treatment or outpatient treatment or services for mental illness, developmental disability, alcoholism, or drug abuse, including the administration of psychotropic medication, the written, informed consent of the minor's parent or guardian is

- required, except as provided under ss. 51.13 (1) (c) 2., 51.14 (3) (h) and (4), 51.135 (2), and 51.47 (1).
- **SECTION 53.** 51.61 (6) (b) of the statutes is created to read:
- 4 51.61 (6) (b) If the minor is 14 years of age or older:
 - 1. Except as provided in subd. 5., for the receipt of inpatient treatment for developmental disability or mental illness, the minor and a parent with legal custody of the minor or the minor's guardian shall execute the application, except for all of the following:
 - a. A refusal or inability of the minor's parent or guardian to provide written, informed consent for inpatient treatment for mental illness or developmental disability is reviewable under s. 51.13 (1)(c) 1.
 - b. If the minor refuses to execute an application for or consent to a transfer for inpatient treatment for mental illness or developmental disability, the minor's parent or guardian may execute the application or consent on the minor's behalf. Refusal by the minor to execute the application or consent is reviewable under ss. 51.13 (3) and (4) and 51.35 (3) (b).
 - 2. For the receipt of inpatient treatment for alcoholism or drug abuse, a parent with legal custody of the minor or the minor's guardian shall execute the application, except as provided in s. 51.47 (2) (b), (c), and (d) and except that a refusal or inability of the minor's parent or guardian to provide written, informed consent for inpatient treatment for alcoholism or drug abuse is reviewable under s. 51.13 (1) (c) 1.
 - 3. Except as provided in subd. 5., for the receipt of outpatient treatment for mental illness or developmental disability, the minor and a parent with legal custody of the minor or the minor's guardian shall provide written, informed consent, except for all of the following:

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1	a. A refusal or inability of the minor's parent or guardian to provide written,
2	informed consent is reviewable under s. 51.14 (3) and (4).
3	b. If the minor refuses to provide written, informed consent, the minor's parent
4	or guardian may provide written, informed consent on behalf of the minor. Refusal
5	by the minor to provide written, informed consent is reviewable under s. 51.14 (3) and

- 4. For the receipt of outpatient treatment for alcoholism or drug abuse, s. 51.47 applies.
- For the receipt of psychotropic medication as inpatient or outpatient treatment for mental illness, s. 51.135 applies.

Section 54. Initial applicability.

- (1) INPATIENT TREATMENT. The treatment of sections 51.13 (1) (title), (a), (b), (c) 3., (d), (e), and (f), (2), (3) (a), (b), and (c), (4) (a) (intro.), (c), (d), (g) (intro.), (h) (intro.), (6) (c) and (7) (a), 51.22 (2) and 51.45 (11) (a) of the statutes, the renumbering and amendment of sections 51.13 (4) (g) 1. and (6) (a) and 51.61 (6) of the statutes, and the creation of sections 51.13 (4) (g) 1. a. to c. and 4. and 51.61 (6) (b) (intro.), 1., 2., and 5. of the statutes first apply to inpatient treatment applied for or received in an approved inpatient treatment facility on the effective date of this subsection, regardless of whether admission to the inpatient facility occurred or was sought prior to the effective date of this subsection.
- (2) Consent provided for outpatient treatment. The treatment of sections 51.14 (title), (1), (1m), (3) (a), (b) 3., (f), (g), (h) (intro.) and 1., and (j), and (4) (a) and (g) (intro.), and 51.45 (10) (am) of the statutes, the renumbering and amendment of section 51.61 (6) of the statutes, and the creation of section 51.61 (6) (b) (intro.), 3. 4., and 5. of the statutes first apply to outpatient treatment consented to or received

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on	the	effective	date	of this	subsection	, regardless	of whetl	ner consent	for the
tre	atme	ent occui	red or	was so	ught prior to	o the effectiv	re date of	this subsect	ion.

- (3) TRANSFERS OF TREATMENT. The treatment of sections 51.35 (3) (a), (b), and (g) and (4) (d) of the statutes first applies to transfers of treatment consented to on the effective date of this subsection, regardless of whether consent for the transfer was sought prior to the effective date of this subsection.
- (4) DISCHARGE FROM INPATIENT FACILITIES. The treatment of sections 51.13 (7) (title) and (c) and 51.35 (4) (d) of the statutes, the renumbering and amendment of section 51.13 (7) (b) of the statutes, and the creation of section 51.13 (7) (b) 3. of the statutes first apply to discharges from inpatient facilities made on the effective date of this subsection, regardless of whether the discharge was sought prior to the effective date of this subsection.
- (5) PSYCHOTROPIC MEDICATION. The treatment of sections 51.01 (13r) and 51.135 of the statutes, the renumbering and amendment of section 51.61 (6) of the statutes, and the creation of section 51.61 (6) (a) and (b) (intro.), 1. (intro.), 3. (intro.), and 5 of the statutes first apply to the administration of psychotropic medication on the effective date of this subsection.

SECTION 55. Effective date.

(1) This act takes effect on the first day of the 2nd month beginning after publication.

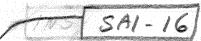
SENATE AMENDMENT 1, TO 2005 SENATE BILL 226

September 30, 2005 – Offered by Senator Roessler.

1	At the locations indicated, amend the bill as follows:	SAI-I
2	- 1. Page 8, line 20: delete "assistance from" and substitute "be inform	ned about
3	how to contact".	SA1-2
4	2. Page 9, line 23: after "admitted" insert "or his or her designee".	C21137
5	3. Page 9, line 24: after "center" insert "or his or her designee".	-[SAI-3]
6	4. Page 10, line 24: delete "14 days" and substitute 14 7 days, exc	clusive of
7	weekends and legal holidays,".	
8	5. Page 10, line 25: delete "14 days" and substitute "A4 7 days, exc	clusive of
9	weekends and legal holidays,".	SA1-5
10	6. Page 11, line 8: delete "14 days" and substitute "14 7 days, exc	clusive of
11	weekends and legal holidays,".	YSA1-6

16. Page 21, line 2: after that line insert:

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Section 41m. 51.14 (7) of the statutes is created to read: 1 2 51.14 (7) LISTING OF MENTAL HEALTH REVIEW OFFICERS. The department shall 3 compile a list that specifies the mental health review officers in each county, post the 4 list on the department's website, and update the list as necessary. \?. 17. Page 21, line 21: after "section" insert ", unless the treatment director of 5 the inpatient facility or outpatient facility determines that there is evidence that the 6 7 minor has suffered abuse or neglect or that the treatment record indicates evidence 8 of the potential for the minor to suffer abuse or neglect. 18. Page 21, line 22: delete the material beginning with that line and ending 9 5A1-18 with page 22, line 4 and substitute: 10 11 **SECTION 44m.** 51.30 (5) (b) 2. of the statutes is amended to read: 12

51.30 (5) (b) 2. A minor upon reaching the age of who is aged 14 or older shall have access to his or her own court and treatment records, as provided in this section. A minor under the age of 14 shall have access to court records but only in the presence of a parent, guardian, counsel, guardian ad litem or judge and shall have access to treatment records as provided in this section but only in the presence of a parent, guardian, counsel, guardian ad litem or staff member of the treatment facility.".

19. Page 24, line 2: delete "may receive assistance from" and substitute "shall

be informed about how to contact.

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(END)

SENATE AMENDMENT 1, TO SENATE AMENDMENT 1, TO 2005 SENATE BILL 226

October 18, 2005 - Offered by Senator Roessler.

1	At the locations indicated, amend the amendment as follows:	SAI-SAI- 1
2	1. Page 2, line 3: after "requested" insert "or required".	
3	2. Page 2, line 8: after "requested" insert "or required".	SA1-SH1-2
4	(END)	
	His amendment is }	
	His amendment is made ineffective hy AAI	

ASSEMBLY AMENDMENT 1, TO 2005 SENATE BILL 226

February 27, 2006 - Offered by Representative Underheim.

1	At the locations indicated, amend the bill as follows:	
2	Page 2, line 1: delete the material beginning with "disability," and ending	
3	with "records" on line 2 and substitute "disability.".	
4 v	2. Page 5, line 1: delete the material beginning with that line and ending with	
5	page 6, line 2.	
6	3. Page 11, line 4: delete lines 4 and 5 and substitute "refusal, or if a hearing	
7	has".	4
8	4. Page 11, line 9: delete that line and substitute "is sooner, and shall".	f toward
9	5. Page 16, line 21: delete the material beginning with that line and ending	
9		
	5. Page 16, line 21: delete the material beginning with that line and ending	n addition.
10	5. Page 16, line 21: delete the material beginning with that line and ending with page 17, line 24.	And the second s

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1	7. Page 18, line 7: delete lines 7 to 15.
2	8. Page 18, line 21: delete "s. 51.61 (6) sub. (1m)" and substitute "s. 51.61 (6)".
3	9. Page 18, line 23: delete "was provided under sub. (1m)" and substitute for
4	outpatient treatment was provided.
5	10. Page 19, line 21: delete "s. 51.61 (6) sub. (1m)" and substitute "s. 51.61 (6)".
6	11. Page 20, line 16: on lines 16 and 21, delete "s. 51.61 (6) sub. (1m)" and
7	substitute (s. 51.61 (6)).
8	√ 12. Page 21, line 13: delete lines 13 to 21, as affected by senate amendment
9	경영 하고 있다. 그는 사람들이 살아들이 되었다는 것이 되었다. 그는 사람들이 되었다. 그는 사람들이 되었다.
10	13. Page 25, line 22: delete the material beginning with that line and ending
11	with page 28, line 10, and substitute:
12	"SECTION 51m. 51.61 (6) of the statutes is amended to read:
13	51.61 (6) Subject to the rights of patients provided under this chapter, the
14	department, county departments under s. 51.42 or 51.437, and any agency providing
15	services under an agreement with the department or those county departments have
16	the right to use customary and usual treatment techniques and procedures in a
17	reasonable and appropriate manner in the treatment of patients who are receiving

the right to use customary and usual treatment techniques and procedures in a reasonable and appropriate manner in the treatment of patients who are receiving services under the mental health system, for the purpose of ameliorating the conditions for which the patients were admitted to the system. The written, informed consent of any patient shall first be obtained, unless the person has been found not competent to refuse medication and treatment under s. 51.61 (1) (g) or the person is a minor 14 years of age or older who is receiving services for alcoholism or drug abuse or a minor under 14 years of age who is receiving services for mental illness, developmental disability, alcoholism, or drug abuse. In the case of <u>such</u> a

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minor, the written, informed consent of the parent or guardian is required, except as provided under an order issued under s. 51.13 (1) (c) or 51.14 (3) (h) or (4) (g), or as provided in s. 51.47. If the minor is 14 years of age or older and is receiving services for mental illness or developmental disability, the written, informed consent of the minor and the minor's parent or guardian is required. A, except that a refusal of either such a minor 14 years of age or older or the minor's parent or guardian to provide written, informed consent for admission or transfer to an approved inpatient treatment facility is reviewable under s. 51.13 (1) (c) 1, (3), or (4), or 51.35 (3) (b), and a refusal of either a minor 14 years of age or older or the minor's parent or guardian to provide written, informed consent for outpatient mental health treatment is reviewable under s. 51.14."

14. Page 28, line 14: delete lines 14 to 17 and substitute "(6) (c) and (7) (a), 51.22 (2), 51.45 (11) (a), and 51.61 (6) of the statutes, the renumbering and amendment of section 51.13 (4) (g) 1. and (6) (a) of the statutes, and the creation of sections 51.13 (4) (g) 1. a. to c. and 4. of the statutes first apply to inpatient treatment applied for or received in an".

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- 15. Page 28, line 22: delete lines 22 to 25 and substitute "51.14 (title), (1), (3) (a), (b) 3., (f), (g), (h) (intro.) and 1., and (j), and (4) (a) and (g) (intro.), 51.45 (10) (am), and 51.61 (6) of the statutes first apply to outpatient treatment consented to or received".
 - **16.** Page 29, line 13: delete lines 13 to 17.

(END)

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2005 SB 226
In enrolling, the following correction was made:
Item 9 of senate amendment 1 and item 2
of senate amendment 1 to senate amendment 1
were not given effect because item 5
of assembly amendment 1 deleted that material.
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State of Misconsin 2005-2006 LEGISLATURE

CORRECTIONS IN:

2005 SENATE BILL 226

Prepared by the Legislative Reference Bureau (May 9, 2006)

In enrolling, the following correction was made:

Item 9 of senate amendment 1 and item 2 of senate amendment 1 to senate amendment 1 were not given effect because item 5 of assembly amendment 1 deleted that material.

(END)

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